

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <i>096 9207</i>	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3		/					53						
4		/					54						
5		/					55						
6		/					56						
7		/					57						
8		/					58						
9		/					59						
10	/						60						
11		/					61						
12		/					62						
13	/						63						
14	/						64						
15	/						65						
16		/					66						
17		/					67						
18		/					68						
19	/						69						
20		/					70						
21	/						71						
22		/					72						
23		/					73						
24		/					74						
25		/					75						
26		/					76						
27		/					77						
28		/					78						
29		/					79						
30		/					80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	<i>19</i>						TOTAL IND.						
TOTAL DEP.	<i>11</i>						TOTAL DEP.						
TOTAL CLAIMS	<i>30</i>						TOTAL CLAIMS						

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09692507	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51		/				
2		/					52		/				
3		/					53		/				
4		/					54		/				
5		/					55		/				
6		/					56		/				
7		/					57		/				
8		/					58		/				
9		/					59		/				
10		/					60		/				
11		/					61	/					
12		/					62	/					
13		/					63		/				
14		/					64		/				
15		/					65	/					
16		/					66		/				
17		/					67		/				
18		/					68	/					
19		/					69		/				
20		/					70	/					
21		/					71	/					
22		/					72		/				
23		/					73	/					
24		/					74		/				
25		/					75		/				
26		①					76		/				
27		/					77		/				
28		/					78		/				
29		/					79		/				
30		/					80		/				
31		/					81		/				
32		/					82		/				
33		/					83		/				
34		/					84		/				
35		/					85		/				
36		/					86		/				
37		/					87		/				
38		/					88		/				
39		/					89	/					
40		/					90		/				
41		/					91		/				
42		/					92		/				
43		/					93		/				
44		/					94	/					
45		/					95		/				
46		/					96		/				
47		/					97		/				
48		/					98	/					
49		/					99		/				
50	/						100		/				
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						